	Under the Paperwork	Reduction Act of 1995, no per	60f16 AIM Registrant to accoun	App U.S. Palent and Trader	Proved for use thr	PTO/SB/06 (12-4) ough 7/31/2006. OMB 0661-001 DEPARTMENT
٠.	PATE	NT APPLICATION F	EE DETERMINAT for Form PTO-876	PICON RECORD	ion unless it disp	PTO/SB/06 (12.4) DUGH 7/31/2006. OMB 0661-000 DEPARTMENT OF COMMERCE AYS A valid OMB control number ation or Dockel Number
•	APPLICATION AS FILED - PART I				()4	4315660
	FOR	(Column 1)	(Column 2)	SMALL ENTI	TY OR	OTHER THAN SMALL ENTITY
	BASIC FEE (37 CFR 1.16(a), (b), or (c))	NUMBER FILED	NUMBER EXTRA	RATE (\$) FE	<b>E</b> (\$)	
	SEARCH FEE (37 CFR 1.16(K), (1), or (m))			-		RATE (\$) FEE (\$)
	EXAMINATION FEE (87 OFR 1.16(0), (p), or (q))					140
	TOTAL CLAIMS (37 CFR 1.16(1))	42	12	-	[	
	INDEPENDENT CLAIMS (37 CFR 1.16(N))	minus 20 =	·00	X =	OR :	18 = NIL
	APPLICATION SIZE FEE	If the specification and d sheets of paper, the appl is \$250 (\$125 for small e	ication also taked	Х =		18 = 390
	(37 CFR 1.16(s))	additional 50 sheets or fr. 35 U.S.C. 41(a)(1)(G) and	adion there of C-		-1	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1))			·	_     \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	250
	If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL	- lá	6
	APPLICATION AS AMENDED - PART II			TOTAL		TOTAL 15/04
	MILTIL					
AMENDMENT A	CI	AIMS HIGH		SMALL ENTITY	OR .	OTHER THAN SMALL ENTITY
	1	AINING NUME TER PREVIO HOMENT PAID F	USLY EXTRA	RATE (\$) ADDI- TIONAL	. R	ATE.(\$) ADDI-
	Total (17 CFR 1.16()) Q	# Minus "42	5 =	x = FEE (\$)	۲ -	TIONAL FEE (\$)
	(37 CFR (.16ft))	Minus - 8	=	Х =	OR X	2002
				OR X	200=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37.CFR 1.16(1))						(01)
				TOTAL ADD'L FEE	OR ADD'	L FEE
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST					
ENT B	REMAI AFTI AMEND	ER PREVIOUS PAID FO	SLY EXTRA	RATE (\$) ADDI- TIONAL FEE (\$)	RAT	E (\$) ADDI- TIONAL
AMENDMENT	(31 CFR 1.18(1))	Minus 44		X =	OR'X	FEE (\$)
Ψ	Application Size Fee (37 (	***************************************		X =	OR X	=
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))					

If the entry in column 1 is less than the entry in column 2, write "0" In column 3.

"If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the Including gatheing, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any continents and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

This collection of the public which is to file (and by the public which is to file (and by the public which is to file (and by the public of the public which is to file (and by the public of the public which is to file (and by the public of the Individual case in the public of the Individual case in the Individual case i

TOTAL

ADD'L FEE

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